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Bib Data Sheet

CONFIRMATION NO. 5970

<b>SERIAL NUMBER</b> 10/762,957	<b>FILING OR 371(c) DATE</b> 01/22/2004 <b>RULE</b>	<b>CLASS</b> 455	<b>GROUP ART UNIT</b> 2617	<b>ATTORNEY DOCKET NO.</b> 555255012689
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\*\* CONTINUING DATA \*\*\*\*\*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

CANADA PCT/CA03/00092 01/23/2003

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\*

04/27/2004

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY CANADA	SHEETS DRAWING 11	TOTAL CLAIMS 54	INDEPENDENT CLAIMS 14
Verified and Acknowledged Examiner's Signature _____ Initials _____					

## ADDRESS

33787

## TITLE

Methods and apparatus for re-establishing communication for a wireless communication device after a communication loss in a wireless communication network

<b>FILING FEE RECEIVED</b> 2458	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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